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Raising awareness of Fall Risk patients among nurses



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Introduction:

Over the years, there has been a sharp increase in unintentional fall rates among the elderly and this has become a pressing concern (HPB, 2012). According to the National Registry of Diseases Office (NRDO) of Singapore, it has been reported that an estimated 277.7 per 100,000 adults aged 60 years and older experience at least a fall per year. Within this population, 85% of them suffer from traumatic injuries involving the head or fracture of the limbs which could lead to severe consequences (SingHealth, 2017). Fall incidence rates are projected to escalate with an ever ageing population and this alarming phenomenon calls for the need for interventions to be implemented to (1) enhance the assessment tools used to identify patients with risk for falls; and (2) improve the handover process of fall risk patients.

In ward 28 where patients are placed in single rooms, it is challenging for nurses to oversee patients on Fall Precaution (FP). In the past half a year, our ward saw an average of 1-2 fall incidences per month. An RCA was performed and the following contributing factors were identified (Fig. 1):

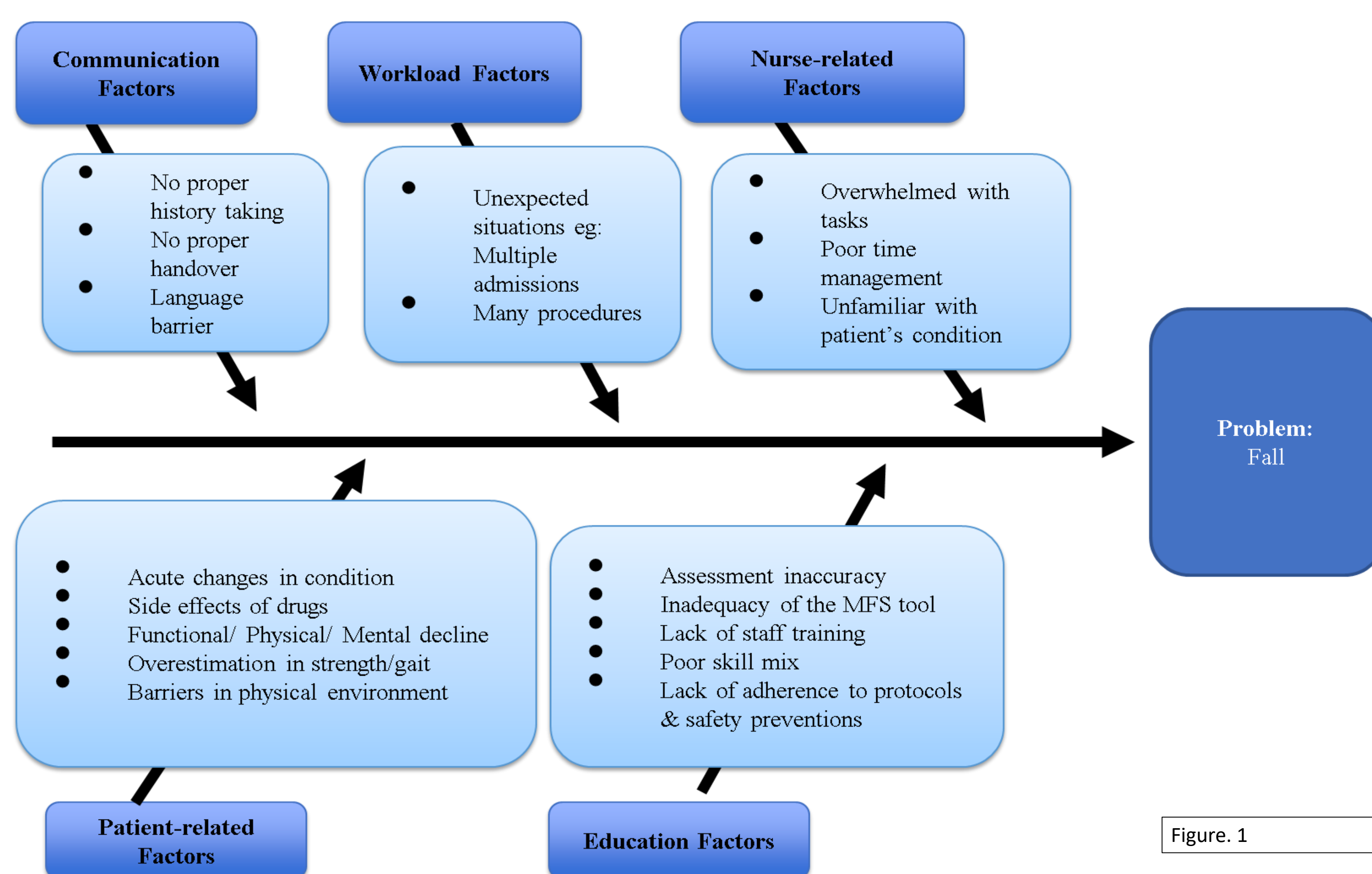


Figure 1

Aims:

The aim of this study is to explore the effectiveness of a form in (1) enhancing the assessment accuracy of patients on risk for falls and (2) facilitating the handover process of these information with an overall purpose to reduce fall rates.

Methodology:

The hospital's standardized method of assessing patients for fall risk is by using the Morse Fall Scale (MFS) tool. Three interventions were explored and analyzed as shown below (Fig. 2). After evaluating the overall effectiveness of these interventions, a new form (A) was designed to be used on top of the conventional MFS tool (See Fig. 3).

Solutions	Manpower Saving	Cost Saving	Time Saving	Overall Effectiveness
Perform frequent checks and offer assistance for toileting needs.	✓	✓		
Provide extra staffing at night to watch over demented patient without carers			✓	
Create a form to highlight patient particulars	✓	✓	✓	✓

Figure 2

Analysis of the various measures brainstormed

Data Collection Process:

- Sampling method: Purposive or Total population sampling
- Sample size: 29
- Conventional method: MFS assessment tool only
- Intervention involved: MFS assessment tool + form (A)
- Data collection period: March to May 2018
- Outcome measures: Monthly fall rates + survey questionnaire

PRE-intervention phase:

January fall rate: 1.8
(Total Falls / Total Patient Day) x 1000 Patient Days
Staff were briefed prior to the trial

POST-intervention phase:

- Monthly fall rates were monitored from March to May 2018
- Survey questionnaires on form (A) were distributed

Interventional phase:

Form is completed by morning shift staff who performed the daily MFS assessment. This form was communicated during daily roll call handover period for the month of February

QUESTIONNAIRE SURVEY ON FORM (A): FALL RISK IDENTIFICATION	YES	NO
Q8. Do you feel that form (A) facilitated the handover process and enhanced the fall risk assessment?		
Q9. By identifying patients who lack carer and/or are non-compliant to fall precautions, do you feel that form (A) promotes vigilance and raise awareness on specific fall risk patients?		

Figure 3

Results:

More than three-quarter (85%) of the nurses reported that form (A) was beneficial in the handover process to ensure continuity of care. Majority (95%) of the nurses also agreed that form (A) helped to raise awareness on patients with risk for falls from factors such as (1) lack of carer and (2) non-compliance which cannot be identified from the MFS tool (Fig. 4).

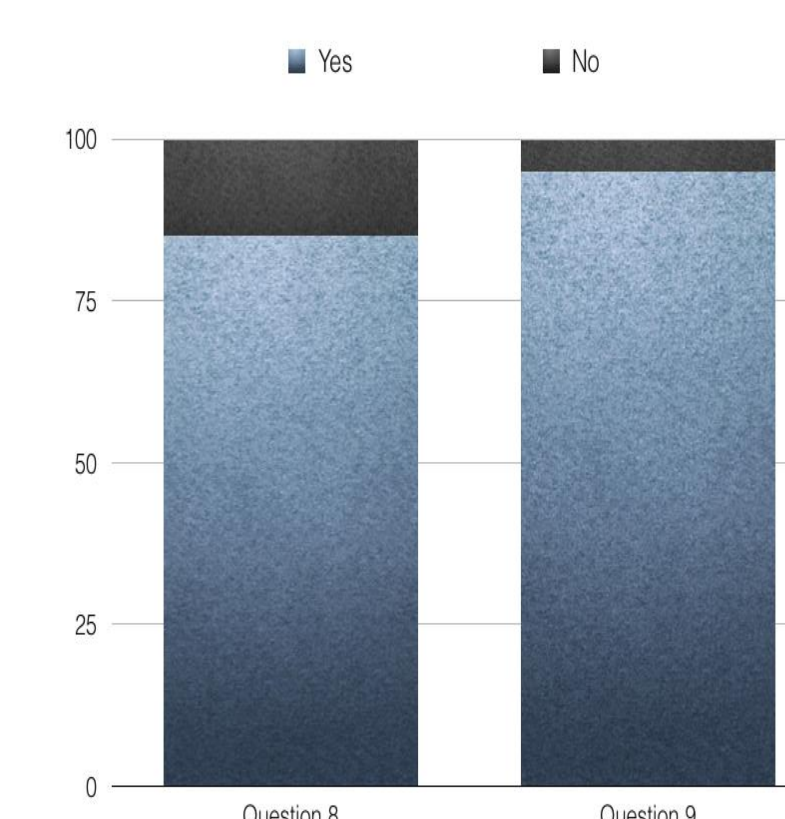


Figure 4

Recommendations:

Form A can be revised to include more details including (1) patient's diagnosis; (2) patients on medications with potential side effects resulting in an increased risk for falls e.g. hypoglycaemic agents and anti-hypertensives; and (3) patient's mental status.

Conclusion:

- Piloting this intervention is easy in a small ward like. However, we foresee that it may have limited benefits for the open wards.
- This project has helped to enhance the assessment of patients with risk for falls.
- Based on the positive findings from this preliminary trial, our team will embark on the improvisation of form (A) which will thereafter be piloted in other inpatient wards to be monitored again over a time period for its effectiveness.

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